



National LED  
6807 Portwest Drive  
Houston TX 77024

[www.nationalled.com](http://www.nationalled.com)

Dear Applicant,

Please make sure you have signed all areas that indicate a signature is needed in order to make sure we can process your request in a timely and efficient manner. Thank you, and we hope you have a great day!

## CREDIT APPLICATION

Company Name \_\_\_\_\_ Line of Credit Requested \$ \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Country \_\_\_\_\_ Zip \_\_\_\_\_ For Past \_\_\_\_\_ years

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Shipping Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Send invoices by (check one): ☐ Email ☐ Fax ☐ Mail to the billing address

Email address or fax number for Invoices: \_\_\_\_\_

Type of Business (check one): ☐ Sole Proprietorship ☐ Partnership ☐ Corporation

Date Established \_\_\_\_\_ Estimated Annual Sales \_\_\_\_\_ No. of Employees \_\_\_\_\_

Name of Parent Company if a subsidiary \_\_\_\_\_ Federal Tax ID# \_\_\_\_\_

Has the firm or any of its principals ever been Bankrupt? ☐ Yes ☐ No

If Yes explain \_\_\_\_\_

Taxable? ☐ Yes ☐ No Sales tax exemption certificate number \_\_\_\_\_

**Please complete attached Sales & Use Tax Certificate if any purchases are exempt. If not, tax will be added to order.**

COMPANY CONTACTS	
Principal _____	Title _____
Phone _____	Email _____
Principal _____	Title _____
Phone _____	Email _____
Purchasing _____	Phone _____
Email _____	Fax _____
Purchase Order No. Required? (check one)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Accounts Payable _____	Phone _____
Email _____	Fax _____

## BANK REFERENCE

Bank Name \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Type of Account \_\_\_\_\_ Account Number \_\_\_\_\_

## TRADE REFERENCES

1. Name \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
2. Name \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
3. Name \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principals listed.

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed (Net 30 days) and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Name of Business \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_

<b>INTERNAL USE ONLY</b>	Approved / Denied	Approved Date
Account Opened	Credit Limit	Terms
Salesperson	Approved by	

## PERSONAL GUARANTY

A personal guaranty must be completed or cash in advance terms may be necessary if the account is for a corporation with limited financial history and operating capital; or established less than five years, is a partnership, or sole proprietorship.

In consideration for National LED extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to National LED by the business identified below whether said sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between National LED and the business. National LED shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance, which may be extended by National LED.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by National LED. Said notice shall specify the date on which this guaranty is to be terminated, said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Name \_\_\_\_\_ Date \_\_\_\_\_  
(Name of person guaranteeing payment, NO TITLE)

Present Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ SS# \_\_\_\_\_

Signature of person guaranteeing payment \_\_\_\_\_

Name of Business whose account is guaranteed \_\_\_\_\_

***Confidential***  
**Authorization to Release Bank Information**

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Bank Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bank Phone \_\_\_\_\_ Bank Fax \_\_\_\_\_

Type of Account \_\_\_\_\_ Account Number \_\_\_\_\_

**AUTHORIZATION TO RELEASE BANK INFORMATION**

I hereby authorize the full release of all bank information to National LED for the sole purpose of establishing an open line of credit.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

**FOR BANK USE ONLY**

Date Account Opened \_\_\_\_\_ Average Daily Balance \$ \_\_\_\_\_

Average (check one) ☐ Low ☐ Medium ☐ High

Balance (check one) ☐ Four Figure ☐ Five Figure ☐ Six Figure

**LOAN**

**HIGH**

**PRESENT**

**LOAN EXPERIENCE**

Unsecured \$ \_\_\_\_\_ \$ \_\_\_\_\_

☐ Satisfactory

Secured \$ \_\_\_\_\_ \$ \_\_\_\_\_

☐ Unsatisfactory

Mortgage \$ \_\_\_\_\_ \$ \_\_\_\_\_

Comments: \_\_\_\_\_

Installment \$ \_\_\_\_\_ \$ \_\_\_\_\_

Line of Credit Available (check one) ☐ Yes ☐ No

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

## CREDIT REFERENCE REQUEST

Date \_\_\_\_\_

To \_\_\_\_\_ Attention \_\_\_\_\_

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

The above company has listed your organization as a credit reference. For the purpose of establishing credit with National LED please provide us with information concerning your experience with the applicant listed above. All information will be held strictly confidential. Your assistance is greatly appreciated.

☐ **CHECK HERE IF YOU SHOW NO RECORD OF THE ABOVE MENTIONED CLIENT**

Sold Since Date \_\_\_\_\_ Date of Last Activity \_\_\_\_\_ Credit Limit \$ \_\_\_\_\_

High Credit \$ \_\_\_\_\_ Present Balance \$ \_\_\_\_\_ Past Due Balance \$ \_\_\_\_\_

**\*\*If there is a Past Due Balance, specify what amounts in each category below\*\***

\$ \_\_\_\_\_ 30 DAYS      \$ \_\_\_\_\_ 60 DAYS      \$ \_\_\_\_\_ 90 DAYS      \$ \_\_\_\_\_ OVER 90 DAYS

Explanation for Past Due \_\_\_\_\_

Payment Terms (check one)

☐ CASH      ☐ 30 DAY      ☐ 60 DAY      ☐ OTHER \_\_\_\_\_

Client's Payment Trend (DBT = Days Beyond Terms)

☐ As Agreed/Within Terms      ☐ 15 DBT      ☐ 30 DBT      ☐ 60 DBT      ☐ 90+ DBT

Additional Information \_\_\_\_\_

### REQUESTED BY APPLICANT

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

## CUSTOMER CREDIT CARD INFORMATION

Company Name \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Type of Credit Card ☐ VISA ☐ Master Card ☐ American Express ☐ Discover

Card Holder Name \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expire Date \_\_\_\_\_ / \_\_\_\_\_ (mm/yyyy)

Security Code \_\_\_\_\_ (3 or 4 digit code on the back of the credit card)

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

If you would like an emailed receipt, please provide you email address \_\_\_\_\_



## TEXAS SALES AND USE TAX RESALE CERTIFICATE

Name of purchaser, firm or agency as shown on permit	Phone (Area code and number)
Address (Street & number, P.O. Box or Route number)	
City, State, ZIP code	
Texas Sales and Use Tax Permit Number (must contain 11 digits)	
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico	
(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)	

I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:

Seller: **National LED**

Street address: **6807 Portwest Drive**

City, State, ZIP code: **Houston, TX 77024**

Description of items to be purchased on the attached order or invoice:

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

sign here	Purchaser	Title	Date
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This certificate should be furnished to the supplier. Do not send the completed certificate to the Comptroller of Public Accounts.